## FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D



# NOTICE OF SALE OF SECRETIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR S UNIFORM LIMITED OFFERING EXEMPTION

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	OMB Number:	3235-0076
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Name of Offering (	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
Newman Title Investors, Ltd.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
12190 Pearl Rd., Strongsville, Ohio 44136	440-268-9491
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Investing in and owning an interest in a title agency	
business trust   Immited partnership, to be formed   LLC	please specify)PROCESSED
Actual or Estimated Date of Incorporation or Organization: O11 O14 Actual Estin Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	THOMSON REUTERS

### GENERAL INSTRUCTIONS

#### Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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## A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Promoter Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) NTI Management, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 12190 Pearl Rd., Strongsville, Ohio 44136 Check Box(es) that Apply: Beneficial Owner Z Executive Officer Director General and/or Promoter Managing Partner Full Name (Last name first, if individual) Ronald Russell Business or Residence Address (Number and Street, City, State, Zip Code) 12190 Pearl Rd., Strongsville, Ohio 44136 Check Box(es) that Apply: General and/or Promoter Managing Partner Full Name (Last name first, if individual) Darlene Crow Business or Residence Address (Number and Street, City, State, Zip Code) 12190 Pearl Rd., Strongsville, Ohio 44136 Check Box(es) that Apply: ☐ Beneficial Owner Promoter Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer Check Box(es) that Apply: Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					В. 1	NFORMAT	ION ABOU	T OFFERI	NG				<del></del>
1.	Has the	issuer sol	d, or does th			ll, to non-a				-		Yes	No E
2.	2. What is the minimum investment that will be accepted from any individual?									\$_200	\$_200.00		
3.	3. Does the offering permit joint ownership of a single unit?										Yes []	No <b>≚</b>	
4.											_	<u> </u>	
Ful		Last name	first, if ind	ividual)		_							
		Residence	Address (N	lumber an	d Street, C	ity, State, 2	Lip Code)					·	
Nai	me of As	sociated B	roker or De	aler	,	. ==						<del></del>	
Sta	tes in Wi	nich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individua	l States)	•••••	••••	•••••	•••••				I States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Ful	l Name (	Last name	fīrst, if iņdi	vidual)			a <b></b>				78 T (M. 18		
Bus	siness or	Residence	Address (?	Number an	d Street, C	City, State,	Zip Code)						
Nai	me of As	sociated Br	roker or De	aler						<u> </u>			
Sta	tes in WI	nich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers	:				<del> </del>	
	(Check	"All States	s" or check	individual	States)							☐ Al	1 States
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Ful	l Name (	Last name	first, if indi	vidual)	-		-						
Bus	siness or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)						
Nar	me of As	sociated Br	oker or De	aler			,						
Sta	tes in Wi	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)	***************************************			***************************************	***,,,,,		☐ Al	l States
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(  \) and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged.	Accesses	Amount Almode
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	<u>2,000.00</u>	\$ 800.00
	☑ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	s
	Partnership Interests		
	Other (Specify)	•	
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	4	\$ 800.00
	Non-accredited Investors	0	§ 0.00
	Total (for filings under Rule 504 only)		s
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify) Legal fees, printing costs and other miscellaneous expenses		\$ 35,000.00
	Total		c 35,000.00

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."			-33,000.00
5.	Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	ly purpose is not known, furnish an estimate and fthe payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	[	\$	<b>\$</b>
	Purchase of real estate	<u>-</u>	] \$	\$
	Purchase, rental or leasing and installation of mac and equipment		<b></b>	<u> </u>
	Construction or leasing of plant buildings and fac	ilitics	<b>\$</b>	<b></b> \$
	Acquisition of other businesses (including the val offering that may be used in exchange for the assessuer pursuant to a merger)	ets or securities of another	٦ ډ	
	Repayment of indebtedness	<del>-</del>	_	_
	Working capital	<del>-</del>		_
	Other (specify): Offering was not fully funded	Г	 ⊋ s 33,000.00	□ °
	Caron (Specify).		<b>4</b>	□
	Column Totals		Z \$ 33,000.00	s 0.00
	Total Payments Listed (column totals added)		<b>Z</b> \$_33	3,000.00
		D. FEDERAL SIGNATURE	<del>- 11 - 11 - 11 - 11 - 11 - 11 - 11 - 1</del>	
igi	rissuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Commiss	sion, upon writte:	
ssı	uer (Print or Type)	Signature	Date	
Ne	wman Title Investors, Ltd.	1/KM /M	7-30	50-C
Var	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
on	ald Russell	Managing Member of NTI Management, LLC		
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- ATTENTION --

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No 🔀
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is fit D (17 CFR 239.500) at such times as required by state law.	led a no	tice on Form
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informat issuer to offerees.	ion furn	ished by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be ent limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claim of this exemption has the burden of cstablishing that these conditions have been satisfied.		
	uer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalthorized person.	f by the	undersigned

Managing Member of NTI Management, LLC

Date

#### Instruction

Issuer (Print or Type)

Name (Print or Type)
Ronald Russell

Newman Title Investors, Ltd.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX 2 l 3 4 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Amount **Investors** Amount Yes No AL ΑK ΑZ AR ÇA CO CTDE DC FLGA HI ID ΙL IN ΙA KS KYLA ME MD MA ΜI MN MS

	APPENDIX										
ı	Intend to non-a investor	2 to sell accredited es in State 8-ltem 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4  Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Accredited Non-Accredited			Yes	No		
МО											
МТ											
NE									[		
NV											
NH											
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	APPENÐIX										
1	1 2 3 4 Type of security							5 Disqualification under State ULOE			
-	Intend to sell and aggregate to non-accredited offering price investors in State (Part B-Item 1) (Part C-Item 1)			Type of investor and amount purchased in State (Part C-Item 2)				(if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY							-				
PR											

